

**APPEAL PROCESS
BLUE CROSS BLUE SHIELD of DELAWARE
(BCBSD)**

OFFICE OF MANAGEMENT & BUDGET
STATEWIDE BENEFITS OFFICE

INITIAL SERVICE

1. Member receives service and a claim is filed by the Member (or by provider on member's behalf) with the carrier.

IF DENIED,

LEVEL I APPEAL – ADMINISTERED BY BCBSD

2. Member must file an appeal with BCBSD within 180 days from receipt of the notice of denial to request a second review of the claim,
3. BCBSD approves or denies the appeal with written notice to the member
 - a. Within 30 days for Pre-Service requests (expedited appeals can be requested) or,
 - b. Within 45 to 60 days for Post-Service requests.

IF DENIAL IS UPHELD,

LEVEL II APPEAL – ADMINISTERED BY BCBSD

4. Member must file a Level II appeal for an independent review within 60 days from receipt of the notice of denial of the Level I appeal.
5. BCBSD approves or denies the appeal with written notice to the member
 - a. Within 30 to 45 days or
 - b. Within 3 to 5 calendar days if your physician certifies that a delay in response would jeopardize your health.

**IF DENIAL IS UPHELD OR IF THE MEMBER IS NOTIFIED THE
CLAIM IS NOT ELIGIBLE FOR INDEPENDENT REVIEW UNDER
CERTAIN CIRCUMSTANCES,**

**LEVEL III APPEAL – ADMINISTERED BY THE STATE OF DELAWARE –
STATEWIDE BENEFITS OFFICE**

6. Member may file an appeal of the denial in writing to the Statewide Benefits Office within 20 days of the postmark date of the notice of denial of the Level II appeal.

Appeals Administrator
RE: APPEAL
Statewide Benefits Office
500 W. Loockerman Street, Suite 320
Dover, DE 19904

7. The Appeals Administrator from the Statewide Benefits Office (or his/her designee) will conduct an internal review of the appeal and provide a written notice of the decision to the member and the carrier within 30 days of receiving the appeal.

IF DENIAL IS UPHELD,

**LEVEL IV APPEAL – ADMINISTERED BY THE STATE OF DELAWARE –
STATE EMPLOYEE BENEFITS COMMITTEE**

8. Member may file a written appeal to the State Employee Benefits Committee (SEBC) within 20 days of the postmark date of the notice of denial from the Statewide Benefits Office.

Chair, State Employee Benefits Committee (SEBC)
RE: APPEAL
Office of Management and Budget
Haslet Armory, Third Floor
122 William Penn Street, Suite 301
Dover, DE 19901

9. The SEBC receives the appeal and:
 - a. Identifies a Hearing Officer (Division Director, Statewide Benefits Office). The Hearing Officer conducts a hearing and submits a report to the SEBC within 60 days of the date of the hearing. The SEBC accepts or modifies the report, and notice of the decision is postmarked to the member within 60 days; **OR**
 - b. Hears the appeal, and notice of the decision is postmarked to the member within 60 days of the hearing.

IF DENIAL IS UPHELD,

LEVEL V APPEAL – DELAWARE SUPERIOR COURT

10. The member may appeal the decision to the Delaware Superior Court within 30 days of the postmark date of the notice of denial from the SEBC.